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PTO/SB/21 (05-03)

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## TRANSMITTAL FORM

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		Application Number	09/991,469
		Filing Date	November 21, 2001
		First Named Inventor	WHAYNE, JAMES G.
		Group Art Unit	3731
		Examiner Name	WOO, JULIAN W.
Total Number of Pages in This Submission		Attorney Docket Number	CNVG-007CIP

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> postcard
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Remarks

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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Signing Attorney/Agent (Reg. No.)	CAROL M. LASALLE, 39,740 BOZICEVIC, FIELD & FRANCIS LLP
Signature	
Date	April 28, 2004

**EXPRESS MAIL LABEL NO. EV 333 997 635 US**

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AMENDMENT 37 CFR 1.111	
Address to:	Attorney Docket No.
Mail Stop Patent Application	Confirmation No.
Commissioner for Patents	First Named Inventor
P.O. Box 1450	Application Number
Alexandria, VA 22313-1450	Filing Date
	Group Art Unit
	Examiner Name
	Title: "DISTAL ANASTOMOSIS SYSTEM"

Sir:

This amendment is responsive to the Office Action dated January 29, 2004 for which a three-month period for response was given making this response due on or before April 29, 2004.

In view of the amendments to the claims and the remarks put forth below, reconsideration and allowance are respectfully requested.

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